



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6534

SERIAL NUMBER 10/054,295	FILING DATE 01/18/2002 RULE	CLASS 435	GROUP ART UNIT 1652	ATTORNEY DOCKET NO. 015389-002990US
APPLICANTS Thomas R. Cech, Potomac, MD; Joachim Lingner, Epalinges, SWITZERLAND; Toru Nakamura, San Diego, CA; Karen B. Chapman, Southborough, MA; Greg B. Morin, Oakville, CANADA; Calvin B. Harley, Palo Alto, CA; William H. Andrews, Reno, NV;				
** CONTINUING DATA ***** This application is a CON of 09/843,676 04/26/2001 which is a CON of 08/854,050 05/09/1997 PAT 6,261,836 which is a CIP of 08/851,843 05/06/1997 PAT 6,093,809 which is a CIP of 08/846,017 04/25/1997 ABN which is a CIP of 08/844,419 04/18/1997 ABN				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/12/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY MD	SHEETS DRAWING 78	TOTAL CLAIMS 14
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 1		
ADDRESS 34151 TOWNSEND AND TOWNSEND AND CREW LLP 8TH FLOOR TWO EMBARCADERO CENTER SAN FRANCISCO , CA 94111				
TITLE VECTORS FOR EXPRESSING TELOMERASE REVERSE TRANSCRIPTASE IN MAMMALIAN CELLS				

<p>FILING FEE RECEIVED 1040</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees								
<input type="checkbox"/> 1.16 Fees (Filing)								
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)								
<input type="checkbox"/> 1.18 Fees (Issue)								
<input type="checkbox"/> Other _____								
<input type="checkbox"/> Credit								